

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Nolan for Congress Volunteer Committee

Full Name (Last, First, Middle Initial)

A. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Mailing Address 255 Plato Blvd E

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 31 | | 2012 |

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Saint Paul | MN | 55107-1623 |

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Purpose of Disbursement
Contribution

011

Transaction ID : D666916

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY

Mailing Address 255 Plato Blvd E

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 02 | | 2012 |

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Saint Paul | MN | 55107-1623 |

Amount of Each Disbursement this Period

| |
|----------|
| 10000.00 |
|----------|

Purpose of Disbursement
ContributionCategory/
Type

Transaction ID : D677690

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15000.00

15000.00